

Work Order ID 106091

106091

Page 1

August-28-13 12:41:53 PM

Item ID: D2582 Accept *N900040100* Setup Start *NS1*
 Revision ID: Stop *NS2*
 Item Name: Hi-Skid Step Leg Ass'y
 Start Date: 8/28/13 Start Qty: 4.00 *4* Cust Item ID:
 Required Date: 8/28/13 Req'd Qty: 4.00 *4* Customer:
 Reference:

Approvals: Process Plan: MLJ Date: 13-08-29 Tooling: _____ Date: _____ Run - Start *NR1*
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop *NR2*

| Sequence ID/ Work Center ID | Operation Description | Set Up/ Run Hours | Tool ID | Tool # | Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|

| Draw Nbr | Revision Nbr |
|----------|--------------|
| D2582 | Rev B |

| | | | | | | | | | |
|-----------|-------------------------------|------|--|--|--|--|--|--|--|
| 100 | | 0.00 | | | | | | | |
| *100* | Small Fab | | | | | | | | |
| Small Fab | Memo | 0.00 | | | | | | | |
| Small Fab | Assemble as per Dwg D2582 and | | | | | | | | |

| | | | | | | | | | |
|-----------------|---|------|--|--|--|--|--|--|--|
| 110 | QC5- Inspect part completeness to step on W/O | 0.00 | | | | | | | |
| *110* | | | | | | | | | |
| QC | Memo | 0.00 | | | | | | | |
| Quality Control | | | | | | | | | |

| | | | | | | | | | |
|-----------|---|------|--|--|--|--|--|--|--|
| 120 | Identify as per dwg & Stock Location: <u>W11003</u> | 0.00 | | | | | | | |
| *120* | | | | | | | | | |
| Packaging | Memo | 0.00 | | | | | | | |
| Packaging | | | | | | | | | |

DAS
36
9-89

DAS
19
9-89

13-11-19

13-11-19

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |
| Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data | | | | | | | | | |
| Equip/Tooling | | | | | | | | | |
| Operator | | | | | | | | | |
| Material | | | | | | | | | |
| Setup | | | | | | | | | |
| Other | | | | | | | | | |
| Process | | | | | | | | | |
| Supplier | | | | | | | | | |
| Training | | | | | | | | | |
| Unapproved | | | | | | | | | |

FAULT CATEGORY

| Landing Gear | General | Other |
|---|---|--|
| <input type="checkbox"/> Bending | <input type="checkbox"/> Bend | <input type="checkbox"/> Grain |
| <input type="checkbox"/> Centre Not Concentric to O/S | <input type="checkbox"/> BOM/Route | <input type="checkbox"/> Hardware |
| <input type="checkbox"/> Cracks | <input type="checkbox"/> Broken/Damaged | <input type="checkbox"/> Inspection Incomplete |
| <input type="checkbox"/> Crushed/Crimped | <input type="checkbox"/> Burrs | <input type="checkbox"/> Instructions Incomplete/Unclear |
| <input type="checkbox"/> Cuffs | <input type="checkbox"/> Contamination | <input type="checkbox"/> Maintenance |
| <input type="checkbox"/> Heat Treat | <input type="checkbox"/> Countersink | <input type="checkbox"/> Misabeled |
| <input type="checkbox"/> Inspection Strip in Tube | <input type="checkbox"/> Cut Too Short | <input type="checkbox"/> Misread |
| <input type="checkbox"/> Ripples in Bend | <input type="checkbox"/> Drill Holes | <input type="checkbox"/> Offset |
| <input type="checkbox"/> Torque Waves in Extrusion | <input type="checkbox"/> Drawing | <input type="checkbox"/> Out of Calibration |
| <input type="checkbox"/> Turning Sequence | <input type="checkbox"/> Finish | <input type="checkbox"/> Out of Sequence |
| <input type="checkbox"/> Wave/Twist in Tube | <input type="checkbox"/> Folio | <input type="checkbox"/> Outside Dimensions |
| | | <input type="checkbox"/> Ovalized |
| | | <input type="checkbox"/> Over/Under tolerance |
| | | <input type="checkbox"/> Part Incorrect |
| | | <input type="checkbox"/> Part Lost/Missing |
| | | <input type="checkbox"/> Part Moved |
| | | <input type="checkbox"/> Positioned Wrong |
| | | <input type="checkbox"/> Power Loss/Surge |
| | | <input type="checkbox"/> Pressure/Forced |
| | | <input type="checkbox"/> Temperature/Cure |
| | | <input type="checkbox"/> Weld |
| | | <input type="checkbox"/> Wrong Stock Pulled |
| | | <input type="checkbox"/> Other |

Work Order ID 106091***106091***

Page 2

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Item ID: D2582

Accept

N900040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Hi-Skid Step Leg Ass'y

Start Date: 8/28/13 Start Qty: 4.00

4

Cust Item ID:

Required Date: 8/28/13 Req'd Qty: 4.00

4

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start ***NR1***

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***

| Sequence ID/ Work Center ID | Operation Description | Set Up/ Run Hours | Tool ID | Tool # | Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|--------------------------------|---|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| 130 | QC21- Final Inspection - Work Order Release | 0.00 | | | | | | | |
| *130* | | | | | | | | | |
| QC | Memo | 0.00 | | | | | | | |
| Quality Control | | | | | | | | | |

MF
13-11-20

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
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| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data | | | | | | | | | |
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| Operator | | | | | | | | | |
| Material | | | | | | | | | |
| Setup | | | | | | | | | |
| Other | | | | | | | | | |
| Process | | | | | | | | | |
| Supplier | | | | | | | | | |
| Training | | | | | | | | | |
| Unapproved | | | | | | | | | |

FAULT CATEGORY

| Landing Gear | General | Other |
|---|---|--|
| <input type="checkbox"/> Bending | <input type="checkbox"/> Bend | <input type="checkbox"/> Grain |
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| <input type="checkbox"/> Cracks | <input type="checkbox"/> Broken/Damaged | <input type="checkbox"/> Inspection Incomplete |
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| <input type="checkbox"/> Wave/Twist in Tube | <input type="checkbox"/> Folio | <input type="checkbox"/> Outside Dimensions |
| | | <input type="checkbox"/> Ovalized |
| | | <input type="checkbox"/> Over/Under tolerance |
| | | <input type="checkbox"/> Part Incorrect |
| | | <input type="checkbox"/> Part Lost/Missing |
| | | <input type="checkbox"/> Part Moved |
| | | <input type="checkbox"/> Positioned Wrong |
| | | <input type="checkbox"/> Power Loss/Surge |
| | | <input type="checkbox"/> Pressure/Forced |
| | | <input type="checkbox"/> Temperature/Cure |
| | | <input type="checkbox"/> Weld |
| | | <input type="checkbox"/> Wrong Stock Pulled |
| | | <input type="checkbox"/> Other |

Picklist Print

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Page 1

Work Order ID: 106091

Parent Item: D2582

Parent Item Name: Hi-Skid Step Leg Ass'y

Start Date: 8/28/13

Required Date: 8/28/13

Start Qty: 4.00

Required Qty: 4.00

Comments: IPP Rev:F Removed Manufacturing 05-11-07 JLM
IPP Rev:G Added part # to Sub 06-08-10 JLM
IPP Rev H New pick list 08.01.11 EC verified by: DD

| Component Item ID/ Item Name | Replacement Item ID | Mfg/ Purch | Bin Item | Primary Location | Last Location | Route Seq ID | Unit of Measure | Qty on Hand | Qty per Kit | Total Qty | Qty Issued | Date Issued | Status |
|---------------------------------|------------------------|---------------|-------------|---------------------|------------------|-----------------|--------------------|-----------------|-------------|--------------|---------------|----------------|-------------------|
| D2278 Step Leg | | Manufactured | No | | | 100 | Each | 20.0000 | 2 | 8 | | 13/11/18 | DAS 36 9-89 |
| | | | | <u>Location</u> | | <u>Loc Qty</u> | | <u>Loc Code</u> | | | | | |
| | | | | GA | | 20 | | | | | | | |
| | | | | 103622 | | 20 | | | 2 | | | B107451 (C) | |
| D2279 Step Spacer | | Manufactured | No | | | 100 | Each | 21.0000 | 1 | 4 | | 13/11/18 | DAS 36 9-89 |
| | | | | <u>Location</u> | | <u>Loc Qty</u> | | <u>Loc Code</u> | | | | | |
| | | | | GA | | 21 | | | | | | | |
| | | | | 73048 | | 2 | | | | | | | |
| | | | | 90014 | | 19 | | | 4 | | | | |
| D2322 Step Spacer | | Manufactured | No | | | 100 | Each | 11.0000 | 1 | 4 | | 13/11/18 | DAS 36 9-89 |
| | | | | <u>Location</u> | | <u>Loc Qty</u> | | <u>Loc Code</u> | | | | | |
| | | | | GA | | 11 | | | | | | | |
| | | | | 104273 | | 7 | | | | | | | |
| | | | | 67611 | | 4 | | | | | | | |
| D3720-1 Step Spacer | | Manufactured | No | | | 100 | Each | 21.0000 | 1 | 4 | | 13/11/18 | DAS 36 9-89 |
| | | | | <u>Location</u> | | <u>Loc Qty</u> | | <u>Loc Code</u> | | | | | |
| | | | | GA | | 21 | | | | | | | |
| | | | | 103658 | | 12 | | | 4 | | | | |
| | | | | 90176 | | 9 | | | | | | | |
| D3720-2 Step Spacer | | Manufactured | No | | | 100 | Each | 19.0000 | 1 | 4 | | 13/11/18 | DAS 36 9-89 |
| | | | | <u>Location</u> | | <u>Loc Qty</u> | | <u>Loc Code</u> | | | | | |
| | | | | GA | | 19 | | | | | | | |
| | | | | 103600 | | 12 | | | 4 | | | | |
| | | | | 97974 | | 7 | | | | | | | |

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
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| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
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| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data | | | | | | | | | |
| Equip/Tooling | | | | | | | | | |
| Operator | | | | | | | | | |
| Material | | | | | | | | | |
| Setup | | | | | | | | | |
| Other | | | | | | | | | |
| Process | | | | | | | | | |
| Supplier | | | | | | | | | |
| Training | | | | | | | | | |
| Unapproved | | | | | | | | | |

FAULT CATEGORY

| | | |
|---|---|---|
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions |
| | | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge |
| | | <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other |

Picklist Print

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Page 2

Work Order ID: 106091

Parent Item: D2582

Parent Item Name: Hi-Skid Step Leg Ass'y

Start Date: 8/28/13

Required Date: 8/28/13

Start Qty: 4.00

Required Qty: 4.00

MS20470AD4-4
Rivet, Universal Head

Purchased

No

100

Each

6,608.0000

22

88

13/11/18

DAS
36
9-89

Location

Loc Qty

Loc Code

GA

1

121652

1

ST336

6607

116188

68

118614

135

122027

188

m125807

2500

m126275

3716

88

MS20470AD4-5

RIVET, UNIVERSAL HEAD

Purchased

No

100

Each

459.0000

4

16

13/11/18

DAS
36
9-89

Location

Loc Qty

Loc Code

ST336

459

125654

459

16

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
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| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data | | | | | | | | | |
| Equip/Tooling | | | | | | | | | |
| Operator | | | | | | | | | |
| Material | | | | | | | | | |
| Setup | | | | | | | | | |
| Other | | | | | | | | | |
| Process | | | | | | | | | |
| Supplier | | | | | | | | | |
| Training | | | | | | | | | |
| Unapproved | | | | | | | | | |

FAULT CATEGORY

| | | | | |
|---|---|---|--|---|
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge | <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other |
|---|---|---|--|---|

D2278 STEP LEG
(2 PLACES)

MS20470AD4-4 RIVET
(5 PLACES PER SIDE)
(INSTALL FROM OUTSIDE OF ASSEMBLY)

D2279 STEP SPACER

D2322 STEP SPACER

MS20470AD4-4 RIVET
(6 PLACES PER SIDE)
(INSTALL FROM OUTSIDE OF ASSEMBLY)

D2582 STEP LEG ASSEMBLY

MS20470AD4-5 RIVET
(2 PLACES)

MS20470AD4-5 RIVET
(2 PLACES)

D3720-2 STEP SPACER

D3720-1 STEP SPACER

C'SINK ON INSIDE
GRIND RIVET FLUSH TO
SURFACE AS REQUIRED
(BOTH SIDES)

D2582 STEP LEG ASSEMBLY PARTS LIST

| QTY | PART NUMBER | DESCRIPTION |
|-----|--------------|-------------------|
| X | D2582 | STEP LEG ASSEMBLY |
| 2 | D2278 | STEP LEG |
| 1 | D2279 | STEP SPACER |
| 1 | D2322 | STEP SPACER |
| 1 | D3720-1 | STEP SPACER |
| 1 | D3720-2 | STEP SPACER |
| 22 | MS20470AD4-4 | RIVET |
| 4 | MS20470AD4-5 | RIVET |

NOTES:

- 1) FINISH: NONE
- 2) IDENTIFICATION: IDENTIFY WITH DART P/N "D2582" USING FINE POINT PERMANENT INK MARKER WHERE INDICATED
- 3) WEIGHT: 1.25 lbs

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CONTROLLED COPY
OFFICE OF MANAGEMENT
WORK CENTER
106091 MJS
1308-25

RELEASED
05-01-10

| | | | |
|------------|---|----|----------|
| B | REPLACE D2280 SPACERS WITH D3720-1/-2 SPACERS REFERENCE NCR 263 UPDATE DRAWING FORMAT | PH | 07.12.27 |
| A | NEW ISSUE | CP | 01.10.05 |
| REV. | DESCRIPTION | BY | DATE |
| DESIGN | PH | | |
| DRAWN | PH | | |
| CHECKED | LE | | |
| MFG. APPR. | | | |
| APPROVED | | | |
| DE APPR. | | | |
| DATE | 07.12.27 | | |

| | |
|--|------------------------|
| DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA | |
| DRAWING NO. D2582 | REV. B SHEET 1 OF 1 |
| TITLE STEP LEG ASSEMBLY | SCALE NTS |
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